

ATTORNEY OR PARTY WITHOUT ATTORNEY (NAME AND ADDRESS) SANFORD, WITTELS & HEISLER LLP 950 THIRD AVENUE, 10th FLOOR NEW YORK, NY 10022		TELEPHONE NO. (646) 723-2947	FOR COURT USE ONLY	
ATTORNEY FOR (NAME) VALERIE GEORGE, ET AL		REFERENCE NUMBER 08354708-01		
Insert name of court, judicial district or branch court, if any, and post office and street address UNITED STATES DISTRICT COURT, CALIFORNIA 450 GOLDEN GATE #1111 SAN FRANCISCO, CA 94102				
SHORT NAME OF CASE VALERIE GEORGE, ET AL vs. SUTTER HEALTH				
PROOF OF SERVICE	HEARING DATE:	HEARING TIME:	DEPT/DIV:	CASE NUMBER: CV082675EDL

I am and was on the dates herein mentioned over the age of eighteen years and not a party to this action;

I served the:

SUMMONS IN A CIVIL ACTION; COMPLAINT; JURY TRIAL DEMANDED; ORDER SETTING
INITIAL CASE MANAGEMENT CONFERENCE AND ADR DEADLINES; STANDING ORDER;
STANDING ORDER RE CASE MANAGEMENT CONFERENCE; STANDING ORDER FOR ALL
JUDGES OF THE NORTHERN DISTRICT OF CALIFORNIA; CONTENTS OF JOINT CASE
MANAGEMENT STATEMENT

Name: SUTTER HEALTH

Person Served: TAMERA PEDERSEN
Title: CORPORATE ADMINISTRATOR

Date of Delivery: 06/27/08
Time of Delivery: 08:20 am

Place of Service: 2200 RIVER PLAZA DRIVE
SACRAMENTO, CA 95833 (Business)

Manner of Service: Personal Service - By Personally Delivering Copies.

In Compliance With: ☒ Federal Rules of Civil Procedure
☐ California Code of Civil Procedure

Fee for service: \$ 60.00

ADOPTED JUDICIAL COUNCIL FORM, RULE 982 (A) (23)

☒ Registered: SACRAMENTO County,
Number: 2007-60

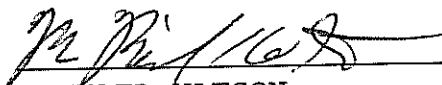
Attorney's Diversified Services

1424 21st Street
Sacramento, CA 95814
(916) 441-4396

Client File # GEORGE V. SUTTER HEALTH

PROOF OF SERVICE

I declare under penalty of perjury that the foregoing is true and correct
and that this declaration was executed
on: June 27, 2008
at: SACRAMENTO, California.

Signature: 
Name: MICHAEL WATSON
Title: REGISTERED PROCESS SERVER

